

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	DATE
FEE DETERMINATION	
DATE CLASSIFIED	
FORMAT/REVIEW	
RESPONSE FORMAT/REVIEW	

### INDEX OF CLAIMS

✓ Rejected  
 - Allowed  
 + (Through numeral)... Canceled  
 Restricted  
 N Non-elected  
 I Interference  
 A Appeal  
 O Objected

Claim	Final	Original	Date
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BEST AVAILABLE COPY

If more than 150 claims or 10 actions  
staple additional sheet here

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